



Mercy Health
Care first

Mercy Health Human Research Ethics Committee

Required signatures for high-risk research projects

NOTE: Departmental signatures must be obtained before submission to HREC office

Project Number:

Project Title:

I/we certify that:

- I/we are familiar with this project and endorse its undertaking;
- The resources required to undertake this project are available;
- The researchers have the skill and expertise to undertake this project appropriately or will undergo appropriate training as specified in this application.

Principal Investigator

Name: _____ Signature: _____

Date: _____

Mercy Health Site Sponsor

Name: _____ Signature: _____

Date: _____

Mercy Health Department Head

Name: _____ Signature: _____

Date: _____

Clinical Services Director (Mercy Health Services)

Name: _____ Signature: _____

Date: _____

Program Director (Mercy Health Services)

Name: _____ Signature: _____

Date: _____

NOTE: CEO signature will be obtained by HREC Administrative Officer after submission

Chief Executive Health Services

Name: _____ Signature: _____

Date: _____

Return to: Ms Rati Ramnauth
Administrative Officer
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